

## **COMMONWEALTH OF MASSACHUSETTS**

## DEPARTMENT OF PUBLIC SAFETY APPLICATION FOR SPRINKLER LICENSE

Please send application to:

Department of Public Safety, Cashier's Division, 1 Ashburton Place, Room 1301, Boston, MA 02108

Application for License as Sprinkler Contractor, Journeyman Sprinklerfitter, or Apprentice Sprinklerfitter in Accordance with Massachusetts General Law Chapter 146 section 81-88

1.	Application Choose the Grade of the lice  \$100 Fire Protection	•	eeking to obtain	n:				rinklerfitter		
a m	Check box if applicable) I am ajor life activity. You must s lication in order for this requ	ubmit the Accommod	lations Reques							
2.	Full Name:		Email Address:							
		(print legibly)								
3.	Home Address:					_ Home Phon	ne #			
		(Street)	(City)	(State)	(Zip Code)					
4.	Mailing Address:		<del></del>							
		(P. O. Box or	Street)		(City)		(State)	(Zip Code)		
5.	Date of Birth:	SS #			Place of Birth:					
6.	Name and Address of Emp	loyer:								
	Employer work number: _									
7.	State full title of occupation	ı:								
8.	Have you ever been examined for a Massachusetts Sprinklerfitter license? O YES, when?O NO									
	Do you hold a Massachusetts Sprinklerfitter license?  If so, list license number:  License number		O YES			O NO				
			License Grade			Expiration date				
Pui	rsuant to Massachusetts Gene knowledge and belief I h									
	Signature of Applicant				Date					
	My signature belov	UTHORIZATION F (MA w authorizes the Depa setts Registry of Mo	SSACHUSETTS artment of Public otor Vehicles	S RESIDENT ic Safety to e atabase solel	electronically by for use on t	access my pho	otograph from tl	he		
1			MA- RMV photo	reieuse signai	иге					

## **Prerequisites:**

ALL of the following items MUST BE SUBMITTED WITH THE APPLICATION in order for your application to be processed properly. Failure to submit all required information and proper fee will result in ineligibility to take the exam and forfeiture / loss of processing fee.

Sprinkler Contractor Prerequisi
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O	Completed Application with proper mailing address and social security number.
$\mathbf{O}$	Attached 1" x 1.25" photo (Unless Authorization for Release of RMV Photo Information Signed-Off)
O	Documentation from employer that you have worked at least five (5) years in the fire protection sprinkler system business in a management position.
O	Documentation that you are an owner, partner, officer, or in a full time management position of a fire protection sprinkler system company.
O	Documentation from an <b>approved school</b> that you have completed <b>300</b> hours of sprinkler fitting study.
O	Proof that you are a citizen of the United States, or entitled to work in the United States.
O	Proof that you are at least eighteen (18) years of age.
O	Non-refundable application processing fee (\$100.00)
Journe	yman Sprinklerfitter Prerequisites
0	Completed Application with proper mailing address and social security number.
0	Copy of high school diploma or equivalency certification
O	Attached 1" x 1.25" photo (Unless Authorization for Release of RMV Photo Information Signed-Off)
O	Non-refundable application processing fee (\$75.00).
O	Documentation from employer that you have worked not less than <b>8,000</b> hours in Massachusetts as an apprentice Sprinklerfitter or trainee.
O	Documentation from an <b>approved school</b> that you have completed <b>144</b> hours of sprinkler fitting study <b>per year of apprenticeship</b> .
OR O	Approved by a majority vote of the Bureau
Apprei	ntice Sprinklerfitter Prerequisites
$\mathbf{O}$	Completed Application with proper mailing address and social security number.
O	Attached 1" x 1.25" photo (Unless Authorization for Release of RMV Photo Information Signed-Off)
O	Documentation that you are employed by a Massachusetts Sprinkler Contractor.
O	Non-refundable application processing fee (\$40.00)

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